

Population, Health and Environment (PHE) in Nepal: Successes, Challenges and Lessons from the RIMS Project

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USAID
FROM THE AMERICAN PEOPLE



RIMS-Nepal
Development through resource management

Presentation outline

- ▣ Nepalese Context on Population, Health and Environment
- ▣ RIMS Nepal and PHE Integration
- ▣ Major Interventions
- ▣ Best practices
- ▣ Lessons
- ▣ Issues/Future Directions

National Context

Population, Health and Environment

- Small land locked country in South Asia
- Population: 23 million (growth rate 2.2%)
- Early marriage, early child bearing, narrow birth spacing
(more than ½ women have had a birth by age 20)
- Average fertility rate according to NDHS(2006): 3.1
(Much higher among the ethnic communities living in remote areas with low education)
- 25% married women have unmet need for family planning.
- Contraceptive prevalence rate is 44%

National Context

Population, Health and Environment..

- Firewood is the main source of energy
- Traditional Nepali hearths are 15 times more polluted than the WHO standard
- Women and children suffer from respiratory disease (7,500 deaths/year due to indoor pollution WHO,2007)
- Total forest area: 29%
- Deforestation rate is 1.7%
- Initiatives are more sectoral

Community Forestry

Opportunity for PHE Integration

- ❑ Community based forest resource management
- ❑ Strong grass-root organization with resources
- ❑ 14000 CFUG involving 35% of Nepalese people are managing 1.2 million ha of forest management
- ❑ Successful in mid-hills of Nepal
- ❑ Scope for integrating population and health agenda in CF agenda.



Remoteness



Early marriage and many children



Poverty/poor sanitation



**Firewood inefficient
cooking stove**

Resource Identification and Management Society Nepal (RIMS Nepal)

Local NGO, not
for profit making

Developed from
USAID supported
NRM project in 2001

Working with more
than 500 CFUGs in
mid hills of Nepal

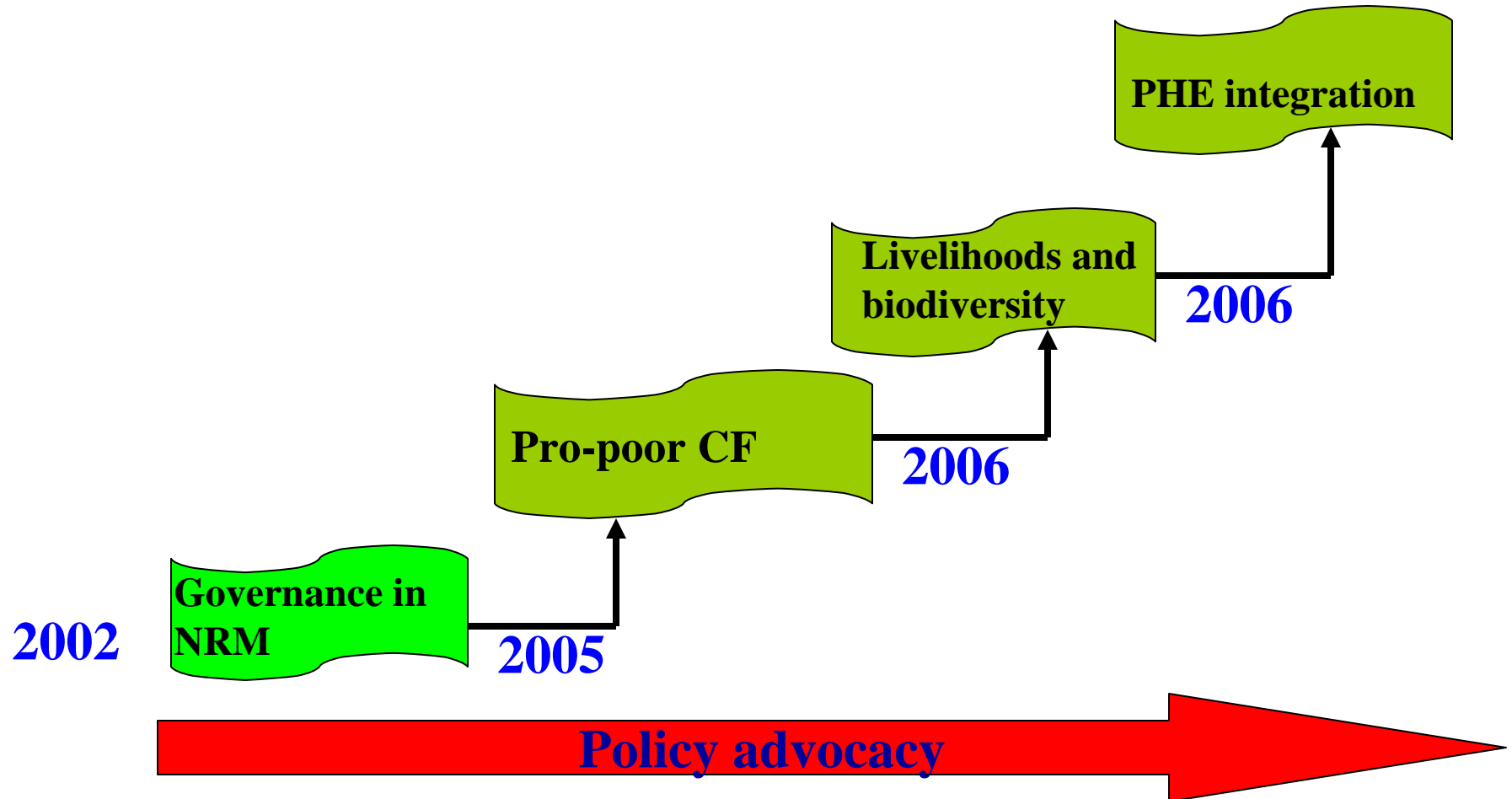


Special focus on:

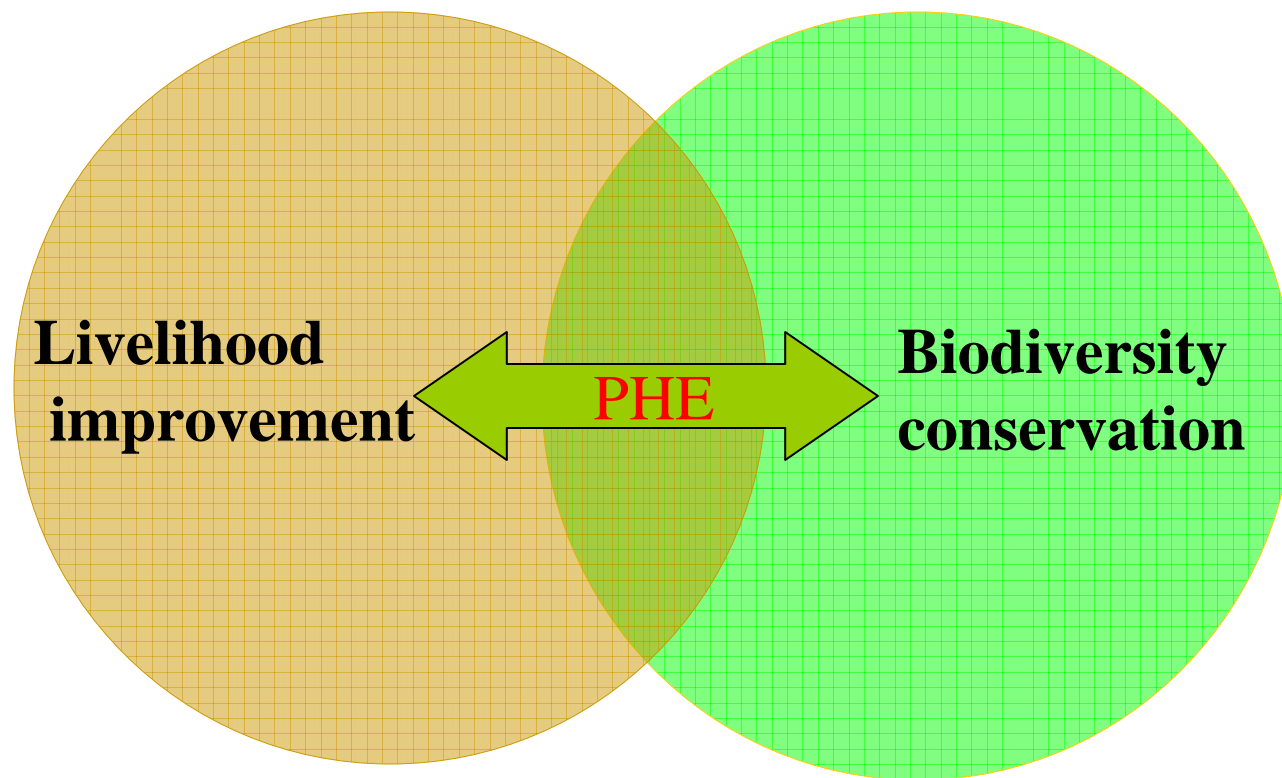
- participatory resource management
- community development
- Livelihoods
- policy advocacy

RIMS-Nepal Pathway:

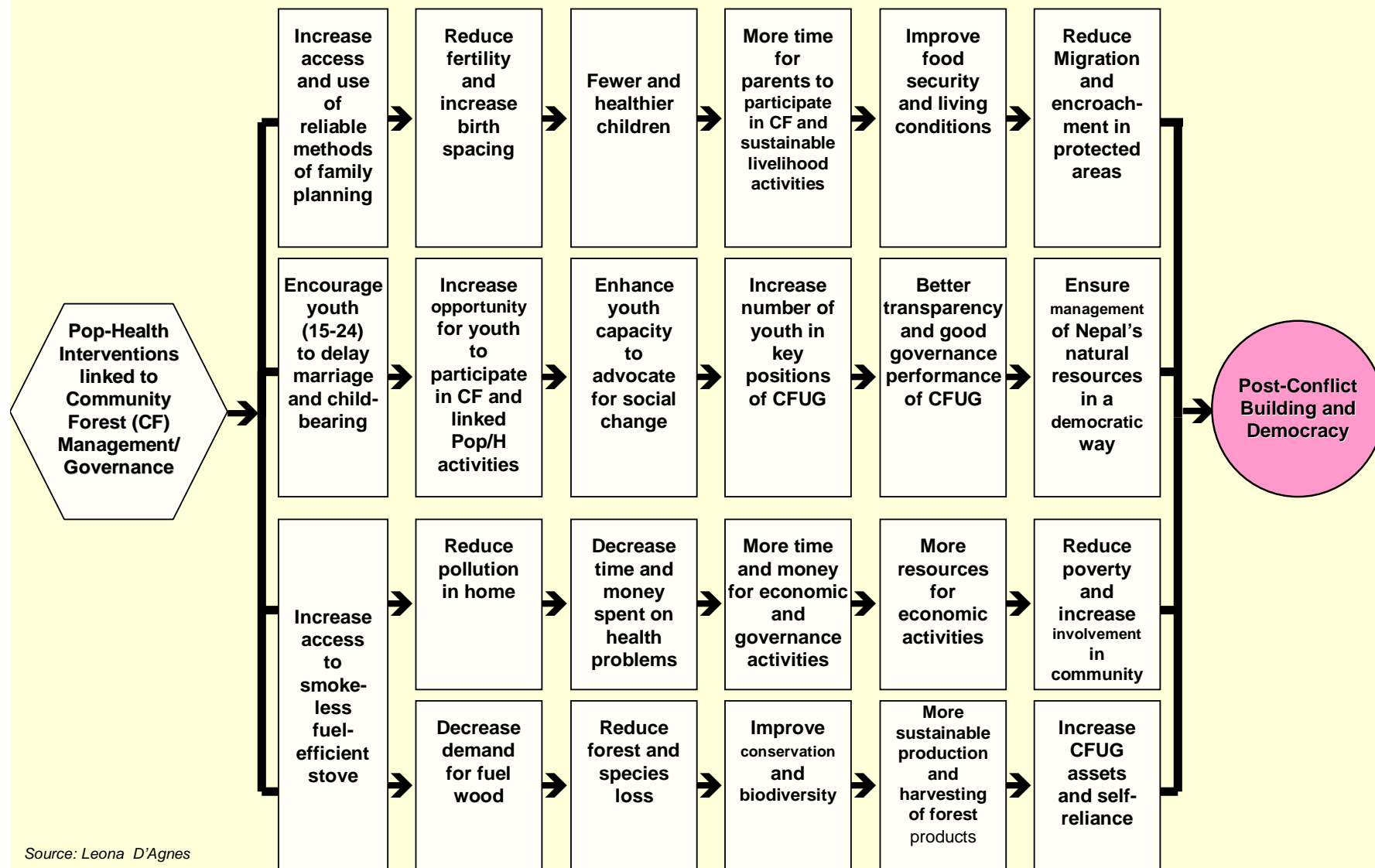
Integration of PHE into NRM Governance



PHE Contribution



Causal Links between Population-Health-Forest Governance Interventions And Post - Conflict Building and Democracy Outcomes in Nepal

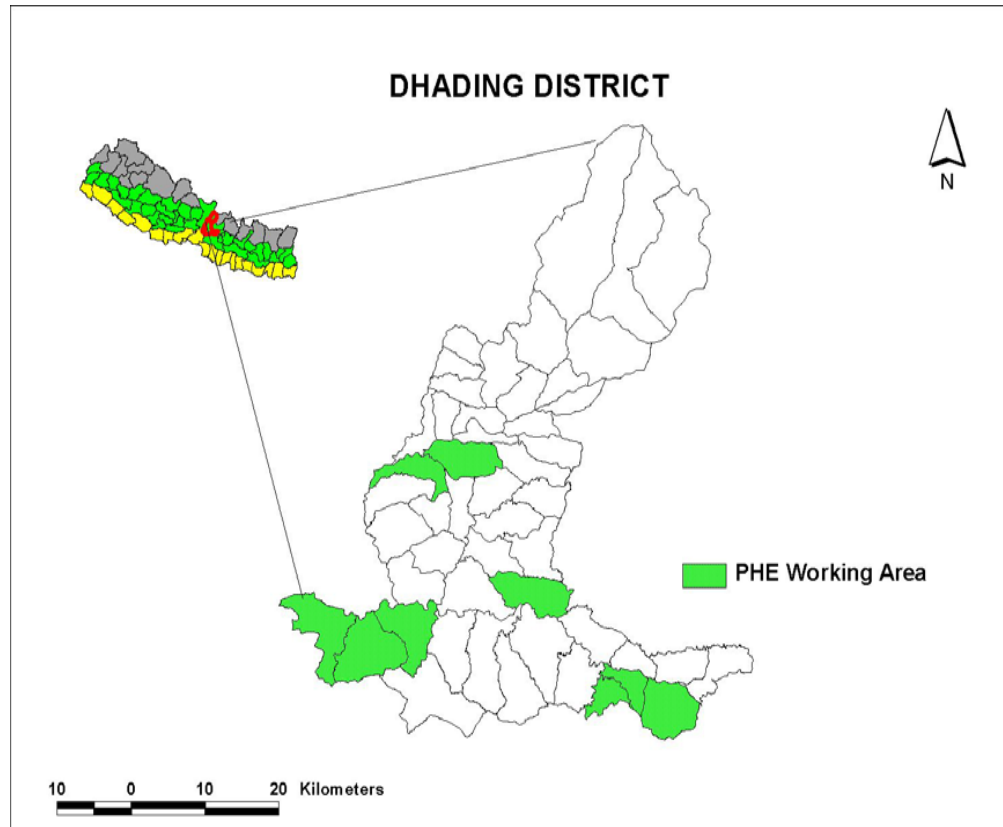


Source: Leona D'Agnes

PHE Specialist,

Nepal NRM-PHE Assessment

PHE Piloting in Dhading



Technical Support:
ADRA Nepal

Financial Support:
USAID through CDM

Project duration: 2 years
(+ 6months extension)

Working area: 82 CFUGs of 9 VDCs

Total Beneficiaries: 5,945 HH

Eligible couple: 6,473



Goal

Improved quality of life in forest corridors and ecosystems
while ensuring sustainable management of Nepal natural resources



Objectives

Improved health outcomes of people
living adjacent to forest ecosystem

Enhanced capacity of CFUG and other community
agents to promote human and ecosystem health
using community based
and integrated PHE approaches

Increased support in forest user groups for PHE
perspectives that are implemented in sustainable
way

Interventions

**Awareness Raising
and Education**

**Local Human Resource
Development**

Institutional Support

Awareness Raising and Education



IEC materials



Street drama



Literacy classes for women and girls



Exposure Visit

Local Human Resource Development



FCHVs/CBDs



Male peer educators



Female peer educators



ICS promoters

Institutional Support

- Revision of CFOP to integrate PHE agenda
- Coordination meeting with multiple stakeholders at different level
- Facilitating resource leverage for PHE at local level
- Female Community Health Volunteers (FCHVs) monitoring support
- FCHV and Outreach Clinic Support jointly with government
- Service Delivery Strengthening Workshops



Service Delivery Strengthening



Out reach clinic



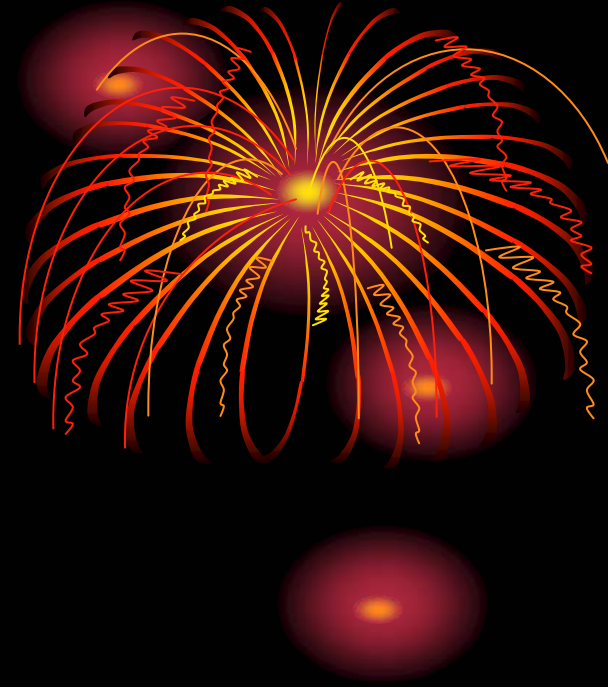
Service delivery strengthening workshop

| यस क्लिनिकमा पाइने सेवाहरू: | |
|------------------------------------|--|
| १. गर्भवती जाँच | ग. बाल स्वास्थ्य |
| २. सुत्केरी जाँच | १. ५ वर्ष मुनिको बच्चाको वृद्धि अनुगमन (बच्चा तौल) |
| ३. नवशिशु जाँच | २. निमोनियाको उपचार |
| ४. आईरन चक्की वितरण | ३. भन्डापखालाको उपचार |
| ५. मिटामिन 'ए' वितरण (सुत्केरीलाई) | ४. स्वास्थ्य शिक्षा तथा परामर्श |
| ६. प्रेषण | ५. परिवार नियोजन |
| ख. परिवार नियोजन | ६. आमा तथा नवजात शिशु स्याहार |
| ७. कण्डम, पिल्स र डिपो वितरण | ७. बाल स्वास्थ्य |
| | ८. यौन रोग तथा HIV/AIDS |

Services available from ORC

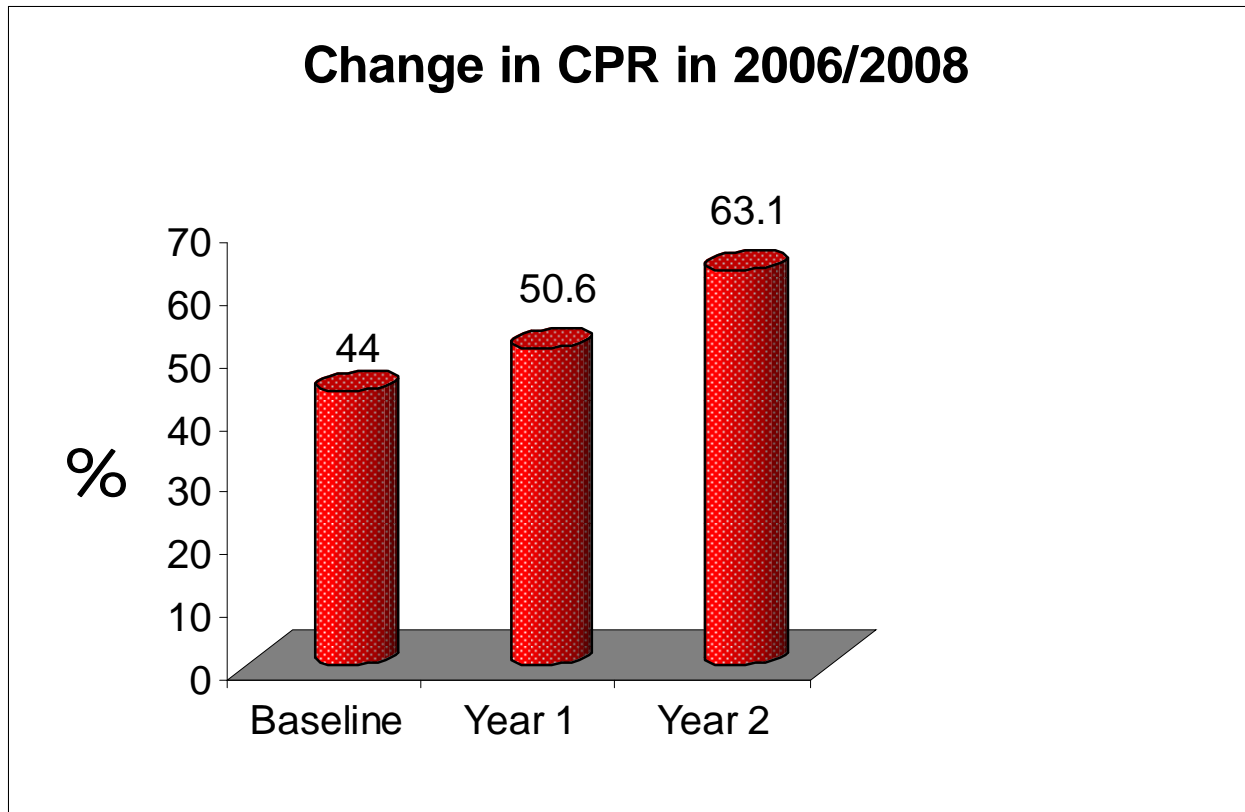
| नेपाल स्वास्थ्य सेवा सन्ध्या नागरिक वडापत्र | | | |
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| २ | स्वास्थ्य शिक्षा कार्यक्रम | स्वास्थ्य शिक्षा | स्वास्थ्य शिक्षा |
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Citizen charter of DHO



Major Outcomes

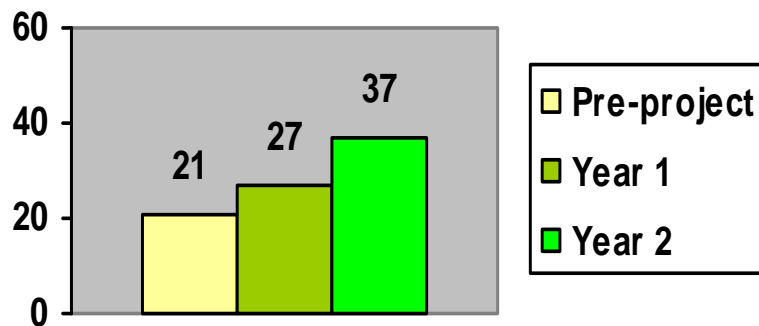
1. Increased Contraceptive Prevalence Rate



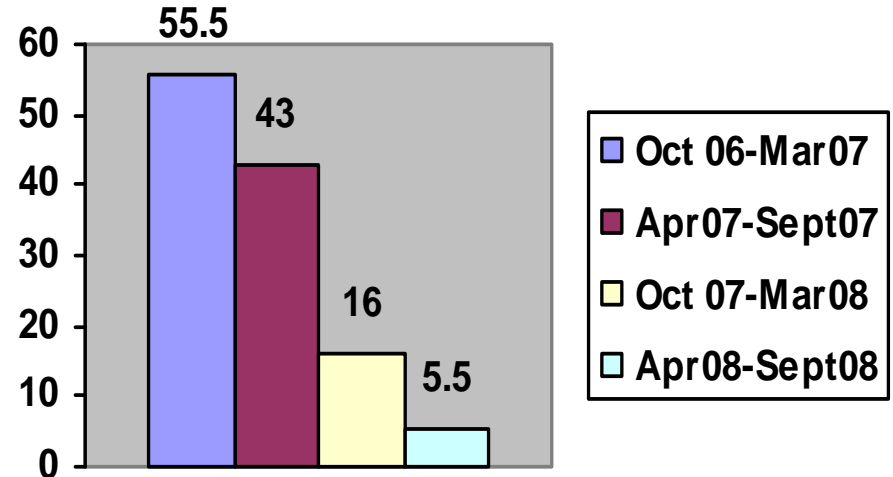
- Increased effectiveness of the project's capacity building inputs
- successful delivery of PHE interventions by the trained outreach workers
- improved understanding among CFUG members of the necessity to limit family size to assure sustainability of forest resources for current and future generations

2. Promotion of Clean Energy and Reduction in ARI

Trends in Clean Energy Use
(% of CFUG Households)



Trends in ARI Case Referral (%)



Inverse relationship between Clean Energy Coverage and ARI Case Referral

Attributed to a number of factors including FCHV's expanded capacity to treat ARI cases in the community, better ARI case recording and reduction in children's exposure to indoor air pollution as a result of the large number of ICS and biogas units installed in the project area.

3. Firewood saved

Installation and use
of ICS and Biogas

Additional 1,178 mt
of firewood saved
per year



ICS promoted by PHE

4. Development of PHE Outreach workers

Developed 375 Local human resources involved in PHE activities including Local Resource Persons, PEs, ICS Promoters, CBDs

5. Resource leverage

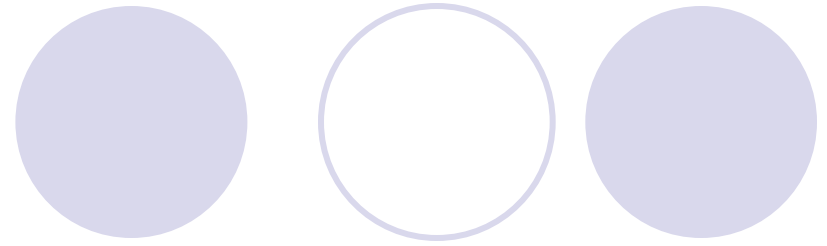
Total amount of \$46,888(NPR 36,57,275) from CFUG, VDC, government line agencies, other donors and partners for community sanitation, outreach clinic investment, ICS and biogas

6. Community Forestry Operational Plans (CFOP) Amendment incorporating PHE activities

25 CFUG operational plans amended incorporating a number of additional interventions like support for ICS installation, ORC management, toilet construction, pregnancy and delivery care for poor CFUG members, and awareness creation on HIV/AIDS, family planning and clean energy.

Best Practices

- ❑ Population and Health integration into Participatory Forest Management Agenda itself is a best practice.
- ❑ The development of local human resources (PHE outreach workers) has increased the importance of integration of PHE in forestry and health institutions.
- ❑ Clean energy promotion has become a campaign in the PHE working area.
- ❑ Integration of PHE agenda in CF Operational Plan
- ❑ Resource leverages



Mithu Magar

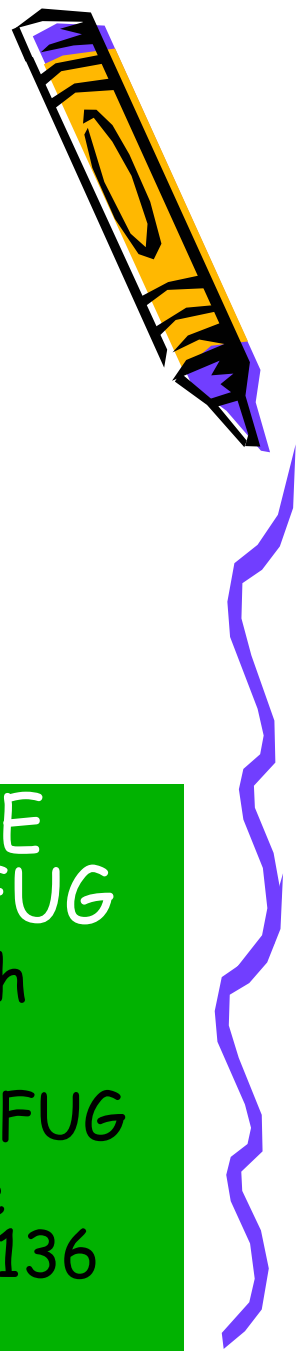
Role model APE for Behaviour
change communication

Mangal Das Tamang
Super Promoter of Improved
Cooking Stoves (ICS)



Collaboration Improved the Access to Health Outreach in Dovan

- PHE and Government support stimulated communities to strengthen ORC service
- Community building renovated leveraging resources from five CFUGs
- Increased demand of service
- HP authority committed to manage quality human resource



Clean Energy, Clean Village: PHE Integration in Dumre Kalika CFUG

- CFUGC members as active outreach workers of PHE
- PHE became important agenda in CFUG
- Fund allocation for ICS and latrine construction as campaign in all the 136 HH



Media coverage: PHE as a successful model

THE HIMALAYAN TIMES, SATURDAY, MARCH 14, 2009

Report hails pilot project on health, environment a success

Himalayan News Service
Dhading, March 13

In less than a couple of years, the Population, Health and Environment Programme (PHE) has been more than successful in attaining its goals of improving the quality of lives of people living in the forest corridors in Dhading and Bardia.

The project uses Community Forest User Groups to ensure sustainable management of the natural resource. PHE is a two-year pilot project supported by USAID Nepal.

A report based on the progress made by the pro-

ject said it was one of the successful projects.

According to the report, the percentage of couples using modern family planning methods increased from 44 to 63.1 percent in the project area after the implementation of the project. Likewise, the number of households using Improved Cooking Stoves and biogas went up from 22 to 37.2 per cent.

Similarly, the amount of firewood saved from the use of ICS and biogas increased from 2,106 metric tonnes to 3,284 metric tonnes. The number of adults and youths trained by PHE project has

reached 375. The total value of cash collected from various resource providers increased from Rs 1,109,900 to Rs 3,657,275 while 10 CFUGs incorporated the PHE agenda into their Community Forest Operations Plans (CFOP).

Rishi Bastakoti, Executive Director of RIMS Nepal, attributed the success to the effectiveness of the PHE approach in general.

The project was launched with the technical support of ADRA-Nepal while RIMS-Nepal and WWF-Nepal were responsible for field implementation.



Lessons Learned

Integrated approaches to achieve a better balance between human and natural resources for more equitable and sustainable development

Governance program is important to prepare the ground. Integration of FP and health brings added value to conservation, poverty reduction and livelihood improvement.

Local volunteers are the key for the success of PHE.

ICS promotion is poor friendly approach to reduce the IAP and insure the fundamental right to live in clean environment.

Contribution directly to the Millennium Development Goals particularly MDG 4 (reduce child mortality), MDG 5 (improve maternal health), MDG 6 (Combat HIV/AIDS), MDG 7 (ensure environmental sustainability), and MDG 8 (develop a global partnership for development)

PHE outcomes also contribute indirectly to other MDGs (poverty eradication, primary education and gender equity and empowerment)

Issues/Future Directions

- ▣ Institutionalization of PHE initiatives
- ▣ Scaling up of the program after successful piloting experiences
- ▣ Recognition of PHE approach at national level

Acknowledgement

- ❑ USAID
- ❑ SAGUN Program
- ❑ Camp Dresser and McKee International
- ❑ Woodrow Wilson International Center for Scholars
- ❑ ADRA International
- ❑ Government of Nepal
- ❑ Leona D' Agnes
- ❑ Heather D' Agnes
- ❑ Linda Kantro
- ❑ People of project area



Thank You